DEPARTMENT OF THE ARMY HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER 6900 Georgia Avenue, NW Washington, DC 20307-5001

Nursing Policy 23 July 2005

Scope of Patient Care and Service

1. UNIT TITLE: Hematology Oncology/Bone Marrow Transplant Unit (WD 71)

2. DESCRIPTION:

Ward 71 is a 17-bed acute care unit providing care for adults (18 years old and above) with Hematology/Oncology diseases, Autologous Stem Cell Transplants, and overflow patients from Internal Medicine, Surgery, and the Hematology Outpatient Clinic. Patient care is provided using an interdisciplinary approach. The average daily census is 13 with average workload of 140.

3. PATIENT POPULATION SERVED:

Patient population ranges from 18 years and older who are eligible for care as designated by the Defense Eligibility and Enrollment Reporting System (DEERS) and the Patient Administration Department. Ward 71 also provides support to the outpatient populations (Ward 78-chemotherapy treatment room) by administering and monitoring chemotherapy patients on protocols, blood product and antibiotic administration after clinic hours and during weekends and holidays.

4. CONDITIONS AND DIAGNOSES TREATED:

Most common diagnoses include leukemia, lymphoma, osteosarcoma, and multiple myeloma plus the Gynecology/Oncology diagnosis of cervical/ovarian cancer and breast cancer. The stem cell transplant patients require complex nursing care based on the side effects from the chemotherapy and degree and duration of neutropenia (immunocompromised status). All oncology patients receiving chemotherapy treatment are at high risk for infection due to the potential for neutropenia

a. High Volume:

- 1) Chemotherapy administration
- 2) Stem Cell pheresis and re-infusion
- 3) Blood products administration
- 4) Neutropenia

b. High Risk:

- 1) Neutropenic patients
- 2) Patients requiring blood products support
- 3) Patients on chemotherapy and high dose chemotherapy
- 4) Elderly with multiple medical problems receiving chemotherapy

c. Problem Prone

- 1) Elderly population from chemotherapy complications
- 2) High dose chemotherapy for Stem Cell Transplant population severe Neutropenia
- 3) Overflow population with infectious diseases which can compromise patients that are immunocompromised

d. High Cost

- 1) Stem Cell transplant population supportive care up to 31 days
- 2) Elderly patients with multiple medical problems due to extended hospital stay

e. Excluded Patients/Services:

- 1) R/O MI prior to a third set of negative enzymes
- 2) Intravenous cardiac drips, excluding heparin
- 3) Conscious sedation
- 4) Cardiac monitoring
- 5) Arterial lines monitoring
- 6) Mechanical ventilation or CPAP
- 7) Non-oncology patients with infectious or contagious disease process such as herpes, chicken pox, measles, VRE, MRSA, TB or suspected TB

5. STANDARDS OR GUIDELINES FOR PRACTICE:

- a. AR 570-4, Manpower Management, 15 May 2000.
- b. FM 8-501, The Workload Management System for Nursing, Nov 1990.
- c. WRAMC Regulations
- d. WRAMC Nursing Polices
- e. Unit level standard operating procedures
- f. American Nurses Association, Scope and Standards of Practice, 2004.
- g. Hematology Oncology Guidelines
- h. Otto, S. E. Oncology Nursing Clinical Reference, Elsevier, 2004
- i. Smith, Sandra F. & Duell, Donna J. Clinical Nursing Skills, 4th ed. Appleton & Lange. 1996.

- **6. TREATMENTS AND ACTIVITIES PERFORMED:** Special Services particular to Ward 71 include but not limited to:
- a. Pain management, chemotherapy, complex research chemotherapy and immunotherapy protocols, Blood Stem Cell Pheresis, Peripheral Blood Stem Cell Transplantation, Blood and Blood products support, complex IV antibiotics, heparin therapy, chest tubes, & respiratory treatments.
- b. Common clinical activities include: admission assessment, patient and family teaching, venipunctures, finger stick blood glucose monitoring, medication administration, urinary catherization, nasogastric tube insertion, tube feedings, oxygen therapy, vital signs monitoring and ongoing shift assessments and documentation of nursing and medical intervention.
- c. Diagnostic modalities: X-rays, XRT, EKG, CT, MRI, Ultrasound, Nuclear scans, ultrasound, labs studies serum/urine, PTT/PT, Type and Cross., bone marrow biopsy

7. PERSONNEL PROVIDING CARE

- a. Nursing:
 - 1) Registered nurses (11 ANC officers, 8 RN civilian)
 - 2) Licensed practical nurses (5 91WM6, 3 LPN)
 - 3) Nursing Assistants (3 91W, 3 CNA GS, 1 CNA contract)
 - 4) Medical Records Technicians (2 civilian)
- b. Other Personnel:
 - 1) Internal Medicine Physicians (4 teams)
 - 2) Hematology Oncology Physicians
 - 3) Bone Marrow Transplant Physicians
 - 4) Bone Marrow Transplant Coordinator
 - 5) Oncology Nurse Specialist
 - 6) Nutrition Care (Oncology)
 - 7) Dietician (Oncology)
 - 8) Physical Therapy
 - 9) Social Work (Oncology)
 - 10)Oncology Pharmacists
 - 11) Laboratory Technicians (Oncology)
 - 12) Respiratory Therapist
 - 13)Chaplain
 - 14) Discharge Planning Personnel
 - 15) Psychiatry Support Personnel
 - 16) Recreational Support Personnel (Support Group, Art Group)

c. Unit core staffing plan

Ward 71	ASAM Authorizations TDA 0405		Weekday Staffing Matrix (excluding Head Nurse and Wardmaster)			Weekend Staffing Matrix (excluding Head Nurse and Wardmaster)		
Staffing	Military	Civilian	Day	Evening	Night	Day	Evening	Night
RN	11	8	5	3	3	3	3	2
LPN	5	3	2	2	2	2	2	2
NA	3	3	2	2	2	2	2	2
MRT	0	2	1	1	0	0	0	0

8. HOURS OF SERVICE: (24 hours daily 7 days a week)